

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000051122

1. Entity Name

PRI-CO HOME INSPECTION SERVICES INC

**FILED**  
**May 10, 2000 8:00 am**  
**Secretary of State**

05-10-2000 90037 001 \*\*\*150.00

05-10-2000 90037 002 \*\*\*\*\*8.75

Principal Place of Business

Mailing Address

312 E 9 MILE RD  
11-142  
PENSACOLA FL 32514  
US

312 E 9 MILE RD  
11-142  
PENSACOLA FL 32514-1439  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0688372

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRICE, GROVER W  
9010 ZELDA ST  
PENSACOLA FL 32514

Name

Grover W. Price Jr.

Street Address (P.O. Box Number is Not Acceptable)

114 W. Garfield

City

Pensacola

FL

Zip Code

32505

8. The above named entity certifies this statement for changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Grover W. Price Jr. 4/25/00

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**

**After MAY 1, 2000 Fee will be \$550.00**

**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME PRICE, GROVER W  
STREET ADDRESS 9010 ZELDA ST  
CITY-ST-ZIP PENSACOLA FL 32514 ☒ Delete

TITLE President  
NAME Grover W. Price Jr.  
STREET ADDRESS 114 W. Garfield  
CITY-ST-ZIP Pensacola, FL 32505 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption indicated on this report or supplemental report is true and accurate and that my signature is the same as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with any address, with all other like information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

4/25/00

Date

(850) 477-4447

Daytime Phone #

CR2E034 (9/99)